| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | ادما | | OCHET NU | |
|---|--|---------------------------------|-----------------------|-------------------------------|--|--|----------|-------------------|--|--------|---------------------|------------------------|
| Effective November 10, 1998 | | | | | | | | | 091 | 9 | 980 |)/9 |
| CLAIMS AS FILED - PART (Column 1) (Column 2) | | | | | | | | SMALL | ENTITY | OR | | THAN ENTITY |
| FOR | | | NUMBE | UMBER FILED NUMBER EXTRA | | | 1 | RATE | FEE | 7 | RATE | FEE |
| 8/ | ISIC FEE | | | | | | | | 380.00 | OR | | 760.00 |
| TOTAL CLAIMS 39 minus 20= • 19 | | | | | | 1 | | X\$ 9= | | OR | X\$18= | 3-12 |
| INDEPENDENT CLAIMS / / minus 3 = * // | | | | | | | | X39= | | OR | X78= | 541 |
| M | ILTIPLE DEPE | LAIM P | RESENT | | .400 | | 1 | | $\mathcal{L}_{\mathcal{U}_{\mathcal{Q}}}$ | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | +130= | <u> </u> | OR | +260= | |
| •. | ` \ \. .k | | • | | TOTAL | <u></u> | OR | TOTAL | 1648 | | | |
| (Column 1) (Column 3) SMALL ENTITY OR SMALL ENT | | | | | | | | | | | | |
| AMENDMENT.A | | CLA REMA AFT AMEND | NING ER | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total . | · 41 |) | Minus | - 39 | z | | X\$ 9= | 9 | OR | X\$18= | 1800 |
| A | Independent | 10 |). | Minus | /0 | 4 | | X39= | | OR | X78= | 0 |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +130= | 5 | | +260= | 8 |
| 3/28/05 | | | | | | | | TOTAL | | OR | +20U= | • |
| | | (Colum | nn 1) | | (Column 2) | (Column 3) | | DOIT. FEE | | OR | NOOT. FEE | 1800 |
| AMENDMENT B | | CLAI REMAI AFTI AMENO | NING ER | | HIGHEST NUMBER PREVIOUSLY PAID, FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | · /8 | | Minus | -40 | • | | X\$ 9= | | OR | X\$18= | |
| | Independent FIRST PRESE | NTATION | OF MI | Minus ILTIPLE DE | PENDENT CLAIM | | | X39= | | OR | X78= | • . |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | | OR | +260= | |
| | | | | | | | | | | OR | TOTAL LOCIT, PEE | |
| | | (Colun | | | (Column 2) | (Column 3) | | OOIT. FEE I | | • | | |
| AMENDMENT C | | CLAI REMAI AFTI AMENDI | NING ER | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | Í | RATE | ADDI- TIONAL FEE |
| | Total | * | | Minus | *** | • | | X\$ 9= | | OR | X\$18= | |
| | Independent | • | | Minus | *** | ۰ | ┢ | | | | | |
| ~ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | F | X39= | | OR | X78≃ | |
| • If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | | · | |
| | f the "Highest Mui f the "Highest Mu | mber Previ Mber Previ | ously Pai ously Pa | d For IN THE id For IN THE | S SPACE is less than S SPACE is less than | 1 20, enter "20." n.3. enter "3." | - | TOTAL OIT. FEE | | | TOTAL DOIT. FEE | |
| 1 | The "Highest Num | ber Previo | usly Paid | For (Total or | independent) is the | highest number | r found | in the app | ropriate box | in cok | mn 1. | . |

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